

04-09-04

3739

PTO/SB/21 (02-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/015,303
	Filing Date	December 12, 2001
	First Named Inventor	Michael D. Hooven
	Art Unit	3739
	Examiner Name	Rosiland S. Rollins
Total Number of Pages in This Submission	Attorney Docket Number	0320-0016 (HOOV 116)

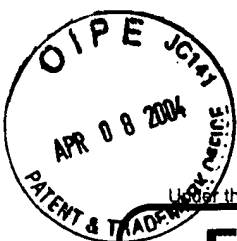
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Cook, Alex, McFarron, Manzo, Cummings & Mehler, Ltd. Gary W. McFarron, Esq., (Reg. No. 27,357)
Signature	<i>Gary W. McFarron</i>
Date	April 8, 2004

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Typed or printed name	Francisca M.A. Hubbard		
Signature	<i>Francisca M.A. Hubbard</i>	Date	April 8, 2004

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 55.00

Complete if Known

Application Number 10/015,303
Filing Date December 12, 2001
First Named Inventor Michael D. Hooven
Examiner Name Rosiland S. Rollins
Art Unit 3739
Attorney Docket No. 0320-0016 (HOOV 116)

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METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 50-1039

Deposit Account Name COOK, Alex, McFarron, Manzo, Cummings & Mehler, Ltd.

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	55.00
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 55.00

SUBMITTED BY

Name (Print/Type) Gary W. McFarron Registration No. 27,357 Telephone 312.236-8500
Signature [Signature] (Attorney/Agent) Date April 8, 2004

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PATENT
Attorney Docket No. 0320-0016 HOOV 116

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:)

Michael D. Hooven)

Serial No.: 10/015,303)

Filed: December 12, 2001)

Group Art No.: 3739)

Examiner: Rosiland S. Kearney)

For: TRANSMURAL ABLATION DEVICE)
WITH THERMOCOUPLE FOR)
MEASURING TISSUE TEMPERATURE)

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"Express Mail" Mailing Label No.: EV322849300US

Date of Deposit April 8, 2004

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NAME Francisca M.A. Hubbard

SIGNATURE Francisca M.A. Hubbard

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1. Transmittal Cover PTO/SB/21 (1 sheet);
2. Fee Transmittal PTO/SB/17 (1 sheet);
3. Petition for Extension of Time Under 37 CFR 1.136(a);
4. Response to Office Action of December 8, 2003 (12 pgs.);
5. \$55.55 (Check no. 16486) ;
6. Certificate of Mailing (1 sheet); and
7. Return-Receipt Postcard.

Name: Francisca M.A. Hubbard

Signature: Francisca M.A. Hubbard